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ABSTRACT

The paper discusses creative dance experiences with visually and mentally handicapped persons. A brief introduction is followed by comments on sensory stimulation during infancy, mobility and orientation, physical education and recreation techniques, and approaches (such as biofeedback and progressive relaxation) to deal with stereotyped movement behaviors. Areas that should be covered in creative dance are listed: body awareness, posture, balance, agility, spatial awareness, coordination, taking weight of partner, rhythm, group activity, stretching, relazation, and voice. (CL)

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CREATIVE MOVEMENT AND DANCE FOR THE VISUALLY AND MENTALLY HANDICAPPED

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CREATIVE MOVEMENT AND DANCE FOR THE VISUALLY AND MENTALLY HANDICAPPED

INTRODUCTION

From a review of the literature, no direct reference has been found to creative dance with the visually and mentally handicapped, though there are many references to movement and mobility.

Different writers and teachers utilise a variety of labels to describe work with the body, such as:- perceptual-motor development, body language, non-verbal communication, space perception, concept formation, sensory skills, physical education. Grace Terry of The Frances Blend School, L.A., described her program as,

> '...exercises designed to help them develop a good self image, body and spatial orientation, co-ordination, muscle tone, and good posture and carriage free from undesirable mannerisms.'[1]

A physical training program focussing on many of these areas should be a foundation for all mobility programs. As well as increasing strength and tolerance for mobility exercises they,

> '...do much to improve directionality, laterality, sense of turn, balance and concentration- all of which are necessary for good independent mobility.'[2]

Exercises should be a part of daily routine and should not be terminated when independent mobility is gained, but continued as a preventive measure to enhance a healthy lifestyle.

The visually and mentally handicapped individual will sometimes have other impairments such as :- obesity, partial hearing loss, migraine headaches, speech deficits, diabetes, heart disease, arthritis, orthopedic problems, neurological disorders, emotional disturbance or learning disabilities. Hopefully some problems can be alleviated by adapted movement programs provided by the staff who could modify their teaching appropriately.

INFANCY

Conscious assistance with physical movement can start shortly after birth. Opportunities for the young child to experience various sensory stimuli will equip him/her with a sound base for the future. Such sensory stimuli should be presented in a simple format, and appropriate feedback given the child upon recognition or successful learning of a given stimulus.

Suitable stimuli would be :- brushing, using bells and other musical instruments, rhythmical patting, change of body position, hydrotherapy, textiled fabrics on the skin, singing, perfumes in the air, use of objects to handle and play with. All of these activities enhance the child's development of memory, discrimination and attention.

Sally Rogow[3], a specialist in this field, says that adults must adjust their behavior to the handicapped child's signs of interest, and respond to even the weakest signals. She suggests that imitation is an effective learning strategy for

infants to progressively combine speech and gesture patterns. Using nursery rhymes to link vocal patterns and actions has proved very effective for children with delayed language development. In a one-to-one situation, a teacher selected rhymes that the child best reacted to, and moved her body along with the rhyme. In a year the girl had learned 25 rhymes and marching jingles.

> 'Her imitative behavior progressively incorporated a wide variety of actions such as marching, jumping, dancing, walking slowly and fast, and walking in big and tiny steps.'[4]

Later, sounds and words were linked to actions, the most successful rhymes being 'London Bridge', 'Old King Cole', 'Humpty Dumpty', 'Jack and Jill'.

As an infant grows older she/he will gradually be given more formalised movement training, which will vary through to adulthood.

MOBILITY AND ORIENTATION

Mobility instructors apply their knowledge of orientation concepts such as:- parallel, perpendicular, directions, and position in space, to students who need to be taught survival and self-sufficiency skills in life. One of the most widely used methods for testing and instruction is the Peabody Mobility Scale.[5] The categories and items are :-

I Motor Development
Basic movement, Creeping, Standing, Walking, Ascending stairs, Descending stairs, Running, Jumping, Climbing.

II Sensory Skills
Sound localization, Tactual discrimination(hands), Tactual discrimination (feet), Olfactory discrimination.

III Concept Development
Body image, spatial relations(front/back; up/down; on/under), Left-right discrimination, Shape discrimination, Size discrimination, Organization.

IV Mobility Skills
Sighted guide, Seating, Turning and maintaining orientation, Trailing, Utilization of discriminable landmarks, Environmental travel.

Harley[6], who did initial testing of the P.M.S. in 1975, completed further work in 1980 with multiply impaired blind children. Forty-two low-functioning children aged 4 - 13 with social ages of 1.92 - 5.79 and a mean of 4.00 were given P.M.S. items for 16 weeks, two twenty minute sessions a day. Motor development and Sensory skills were covered in the first eight weeks, and Concept development and Mobility skills the last eight weeks.

Harley concluded that, compared to a control group

> 'The children who received instruction based on the programmed intervention system demonstrated significant overall performance gains.'[7]

PHYSICAL EDUCATION AND RECREATION

The common link between mobility and physical education is that they both aim to increase movement potential and physical skill acquisition. As well as basic exercises, different approaches are being made to enrich physical education programs.

The "I CAN" Primary Skills Physical Education Program[8] involves 4 major skill areas :-

1. Fundamental skills.
2. Body management.
3. Health and fitness.
4. Aquatics.

This physical education program can be individualised for multihandicapped students. Besides locomotor skill development, other major concerns are muscular strength, stamina, flexibility and relaxation. Typical examples and activities in this program, include :- sitting, standing, walking, holding a rail, upper body - pulling/pushing, jumping, relaxation (music), rolling, using a scooter-board, jumping to a beeper sound above, use of balls, a walking board.

Silberman, working with deaf-blind children in this program states that,

> 'Improvements in orientation and mobility have occurred, as evidenced by an increase in levels of spatial awareness and awareness of direction in space.'[9]

From these positive results, he suggests that to maximise potential of the program and the student

> 'The classroom teacher, the physical educator, the orientation and mobility specialist and the physical therapist as well as the parent, and when appropriate, the child, all must be involved in the program planning.'[10]

In summary, a team approach is far more effective than one person planning the program.

Roller skating, an activity often part of a physical education curriculum for the multihandicapped is excellent for developing all major sensory systems, which include the visual (for those with residual vision), auditory, tactual, kinaesthetic and vestibular senses.

Liberti[11] notes that a rink has varied lighting conditions, reflective objects and mirrored balls suspended from the ceiling which throw off light and cast shadows. There is a specific 'sonar' feel to the rink and popular music enhances rhythmical co-ordination.

The feel of wheels on the floor is unique, and cold metal railings contrast with teachers' warm hands. Kinaesthetically, the rolling step feels novel, being a variation on a normal walk as joints, muscles and tendons receive new input. The brain's balance centres are stimulated by the slight forward bend and inward lean. This is a good social activity, as each student is able to participate with teachers, instructors and peers.

Liberti's support of roller skating as a valuable activity is shown by her statement:

> 'We have observed primarily a reduction in tense body postures and movements.'[12]

With a broader physical education program utilising a more wholistic approach, play and recreation, especially outdoors, takes a prominent place. Activities that release tension and that are also fun to do, can be participated in throughout the seasons. Trips to wading pools, parks and picnic areas, playing in leaves and snow, climbing frames and using swings are all excellent examples. An innovative approach is the use of a running cable[13] which gives a freedom to students that would not necessarily have been felt before. The cable enables the individual to run as fast as possible without fear of obstacles inhibiting the movement patterns. Fluidity of movement ensues and those who normally have awkward walking patterns, may experience the change of running with more confident steps.

More passive forms of tension release include massage and varied approaches to relaxation. Many students find it difficult to, or do not know how to, relax in a standing or lying position, holding their bodies and limbs in a rigid manner, with their heads tilted to the side. By the teacher moving the students' limbs through a variety of spatial pathways, muscular holding patterns change and are therefore decreased.

STEREOTYPED BEHAVIOR

Stereotyped movement behaviors, sometimes termed blindisms, occur on a sliding scale of intensity and severity. Mannerisms are often an

> '..expression and relief of anxiety and tension, arousal, frustration, homeostasis, and need or drive for movement, and of self-injurious behavior...'[14]

Schroeder et al[15] note the positive effects of EMG biofeedback on head-banging. This method was successful in reducing self-injurious behavior. Other approaches to this problem are the use of progressive muscle relaxation techniques, and the use of different forms of music.

Greene et al[16],

> '...used what might be termed a mildly aversive procedure to reduce body rocking in a 15 yr old severely retarded blind boy. The youngster's favorite music (recorded) was distorted when he became involved in rocking.'[17]

CREATIVE MOVEMENT AND DANCE

An overview of the literature on movement with the visually and mentally handicapped, shows that a person specialising in this field, should be,

> '...a free thinker, an analyst, a risk-taker, an experimenter, someone who may not always go by the book.'[18]

These qualities are even more necessary for the teacher of creative dance as there are fewer guide lines to go by, and the process rather than the product, is stressed. Creativity is harder to itemize than specific motor skills and more tolerance is needed for its cultivation. Even the smallest spontaneous movement should be supported and encouraged by the teacher. Since expression is so individualised, there can never be a right or wrong way for student interpretation. Care should be taken to adapt exercises for different age levels.

Creative dance is a form of movement and also an art, that combines most major elements taught in other physical and movement programs. Students can study and develop at their own level and pace, and can have the opportunity of working with others in small groups.

Key areas, with examples, that should be covered are :-

1. Body Awareness
   a) Students feeling shapes made by others, e.g. statues.
   b) Mirroring a partner's movements (for those with residual vision).
2. Posture
   Standing and walking paying attention to the spine and trunk.
3. Balance
   a) On each leg.
   b) On a mat using different body parts (small and large) in combination.
4. Agility
   Controlling the body, rolling close to others and scrambling through bridge shapes made by bodies.
5. Spatial Awareness
   Using levels, and exploring movement range by body parts.
6. Co-ordination
   a) Lowering the body to the floor and rising slowly, bringing attention to all joints simultaneously.
   b) Using slow-motion movements, carrying out everyday actions.
7. Taking Weight
   Taking a partner's weight: back to back, front to back, sitting on a partner.
8. Rhythm
   Using music as a stimulus for various rhythms.
9. Group
   Circle dancing, linking arms and gesturing with legs.
10. Stretching
    Increasing the range of movement potential by working major joints and muscles.
11. Relaxation
    a) Visualisation/Guided Imagery.
    b) Passive limb movements.
    c) Muscles contracting and releasing.
12. Voice
    Calling a partner's name out loudly and softly from varying distances.

Creative movement and dance provides a secure and interesting environment in which to stimulate caring and trust between students. As these attributes are learned, individual tension may diminish, and maximum exposure to movement opportunities may reduce mannerisms.

As physical confidence increases and anxieties are reduced, students or residents become more independent, and have less need of staff assistance or attention. This is an obvious investment for the administration.

It seems that creative dance is a viable option that has neither been fully explored, nor given credit, for its potential as part of a treatment program for the visually and mentally handicapped of all ages.

REFERENCES

1. Terry, Grace.F; Shaffner, Fred, G : Visually Handicapped Children Who Function on a Retarded Level : The Frances Blend School, Los Angeles. New Outlook for the Blind. 66 (5). May 1972. p.136.
2. Thomas, John Evans : Mobility Education for Multiply Handicapped Blind Children in Day Schools : What It Encompasses. New Outlook for the Blind. 66 (9). November 1972. pp 308 - 309.
3. Rogow, S.M: Social Routines and Language Play : Developing Communication Responses in Developmentally Delayed Blind Children. Journal of Visual Impairment. 77 (1). January 1983. p.1.
4. ibid. p.2.
5. Harley, Randall, K; Wood, Thomas, A; Merbler, John B : An Orientation and Mobility Program for Multiply Impaired Blind Children. Exceptional Child. 46 (5). February 1980. p.328.
6. ibid. pp 329 - 331.
7. ibid. p.331.
8. Silberman, Rosanne, K; Tripodi, Victoria : Adaptation of Project "I CAN" Primary Skills Physical Education Program for Deaf-Blind Children. Journal of Visual Impairment. 73 (7). September 1979.
9. ibid. p.276.
10. ibid. p. 271.
11. Liberti, Gina : Roller Skating for Multi Handicapped Students. Journal of Visual Impairment. 74 (9). November 1980. p.359.
12. ibid. p.359.
13. Stephens, Roberta : Running Free : The Use of a 'Running Cable' with Blind Adolescents Who Function on a Retarded Level. New Outlook for the Blind. 67 (10). December 1973.
14. Hayes, Charles. S; Weinhouse, Ellen : Application of Behavior Modification to Blind Children. Journal of Visual Impairment. 72 (4). April 1978. p.141.
15. Schroeder, S.R; Peterson, C.R; Solomon, L.J; Artley, J.J : EMG feedback and the contingent restraint of self-injurious behavior among the severley retarded: Two case illustrations. Behavior Therapy. 8. 1977. pp. 738 - 741. In Application of Behavior Modification to Blind Children. Hayes, Charles.S; Weinhouse, Ellen: Journal of Visual Impairment. 72 (4). April 1978.
17. Hayes. op. cit. p.142.
18. DuPre, Elly : The Agency Administrator's Role in Meeting the Needs of the Multiply Handicapped Blind Client. Journal of Visual Impairment. 76 (9). November 1982. p.366.

BIBLIOGRAPHY (1970 - 1983)

Bentzen, Billie Louise: Transfer of Learning from School Setting to Life Style in a Habilitation Program for Multiply Handicapped Blind Persons. New Outlook for the Blind. 67 (7). September 1973.

Bongers, K.H; Dondlah, A.M: Techniques for initiating visuomotor behavior in visually impaired retarded children. Education of the Visually Handicapped. 4. October 1972.

Bourgeault, Stanley.E; Harley, Randall. K; DuBose, Rebecca.F; Langley, Mary, Beth : Assessment and Programming for Blind Children with Severely Handicapped Conditions. Jornal of Visual Impairment. 71 (2). February 1977.

Cleland, Charles. C; Swartz, Jon, D : Training Activities for the Mentally Retarded Blind. Education of the Visually Handicapped. 2 (3). October 1970.

Crain, C : Dance for Special Populations. Journal of Physical Education, Recreation, Dance. 53. September 1982.

Curren, Elizabeth, A : Teaching Water Safety Skills to Blind Multihandicapped Children. Education of the Visually Handicapped. 3 (1). March 1971.

Del Frari, Paul : Meeting the O and M Needs of the Multiply Handicapped Blind Individual. Journal of Visual Impairment. 72 (8). October 1978.

Ellis, D: Methods of Assessment for use with the Visually and Mentally Handicapped - a Selective Review. Child : Care, Health, and Development. 4. 1979.

Ellis, David : Helping the mentally handicapped blind person. Inter-Regional Review. 72. Winter 1982/83.

Fleming, Mary, Jo : The partially sighted trainable mentally retarded child. Jornal for Special Education of the Mentally Retarded. 9 (2). Winter 1973.

Greene, Robert. J; Hoats, David. L; Hornick, Adelbert. J : Music distortion : A new technique for behavior modification. Psychological Record. 20 (1). Winter 1970.

Guldager, Lars; Hamill, Mary; McGlamery, Rebecca. D : Group Homes for Severely Multiply Handicapped Persons with Visual Problems. Journal of Visual Impairment. 77 (1). January 1983.

Harley, Randall.K; Wood, Thomas. A; Merbler, John. B : Programmed Instruction in Orientation and Mobility for Multiply Impaired Blind Children. New Outlook for the Blind. 69 (9). November 1975.

Johnston, Benjamin. C; Corbett, Michael. C : Orientation and Mobility Instruction for Blind Individuals Functioning on a Retarded Level. New Outlook for the Blind. 67 (1). January 1973.

Klineman, Janet : Hidden Abilities Discovered Among Multiply Handicapped Blind Children. Education of the Visually Handicapped. 7(3). October 1975.

Long, Nancy : Space exploration for young multi-handicapped blind. California State Federation. CEC Journal. 20 (3). June 1971.

McGlinchey, Maureen.A; Mitala, Ronald. F : Using Environmental Design to Teach Ward Layout to Severely and Profoundly Retarded Blind Persons : A Proposal. New Outlook for the Blind. 69 (4). April 1975.

Maron, Sheldon : Training Prospective Teachers of Multiply Handicapped Blind Children. New Outlook for the Blind. 69 (6). June 1975.

Moore, M.E : Developing body image and skills of orientation, mobility and social competency in pre-school, multiply handicapped blind children. Doctoral dissertation, University of Pittsburgh, Ann Arbor, Michigan. University Microfilms 1970, No 70 -20.

Mori, Allen. A; Olive, Jane. E : The Blind and Visually Handicapped Mentally Retarded : Suggestions for Intervention in Infancy. Journal of Visual Impairment. 72 (7). September 1978.

Pomeroy, Janet : Recreation for Severely Handicapped Persons in a Community Setting. New Outlook for the Blind. 66 (2). February 1972.

Rogow, S.M : Play and reality : essentials of educational planning for blind retarded children. Education and Training of the Mentally Retarded. 11. December 1976,

Smeets, P.M : Effects of various sounds and noise levels on stereotyped rocking of blind retardates. The Training School Bulletin. 68. February 1972.

Tombs, Sue : Programme To Develop Low Vision in Mentally Handicapped Children. INSIGHT. The Journal of the Association for the Education and Welfare of the Visually Handicapped. 4 (2). Winter 1982.

Tremble, Judith. T; Campbell, Lawrence. F : A Diversified Co-operative Work Experience for Blind and Multihandicapped Blind Students. New Outlook for the Blind. 67 (5). May 1973.

Tretakoff, Maurice. I: The Evolution of Programs for Blind Mentally Retarded Children in Residential Facilities. Journal of Visual Impairment. 71 (1). January 1977.

Uslan, Mark.M : Teaching Basic Ward Layout to the Severely Retarded Blind. An Auditory Approach. New Outlook for the Blind. 70 (9). November 1976.

Uslan, Mark. M : Orientation and Mobility for Severely and Profoundly Retarded Blind Persons. Journal of Visual Impairment. 73 (2). February 1979.

Uslan, Mark; Malone, S; DeL'Aune, William : Teaching Route Travel to Multiply Handicapped Blind Adults : An Auditory Approach. Journal of Visual Impairment. 77 (1). January 1983.

Wells, John. C : Improving the health status of blind mentally retarded children through adapted physical education. H.S.D. 1972. Indiana University.

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